FORM D RECEIVED OCT 1 2 2006

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB API	PROVAL
OMB NUMBER:	3235-0076
Expires:	April 30, 2008
Estimated average	
hours per response	

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	is an amendment and name has chan	ged, and indicate chang	e.)	3 119 4	77 /
Limited partner interests in T.F. Ca	pital Investors II L.P.			<u> </u>	\prec
Filing Under (Check box(es) that appl	y): Rule 504 Rule 505	☑ Rule 506 □	Section 4(6)	□ ULOE	_ /
Type of Filing: ☑ New Filing	☐ Amendment		,		(
	A. BASIC IDENTIFI	CATION DATA		 	
1. Enter the information requested ab-	out the issuer				
Name of Issuer (Check if this is	an amendment and name has changed	I, and indicate change.)			
T.F. Capital Investors II L.P.					
Address of Executive Offices	(Number and Street,	City, State, Zip Code)	Telephone N	umber (Including Area Co	de)
388 Greenwich Street, New York, N	ew York 10013		(212) 816-60	00	
Address of Principal Business Operati	ons ROC (Number and Street,	City, State, Zip Code)	Telephone No	umber (Including Area Co	de)
(if different from Executive Offices)	F110023				
Brief Description of Business	NUV 13 ZUUD B				
Private equity fund	marchae CETAN				
Type of Business Organization	THOMOGRA		·		
□ corporation	⊠llimiteo pardiership, already	formed \square	other (p		
□ business trust	limited partnership, to be fo		*	06047499	
		Month Ye	ar_		
•	•	0 5 0	5	·	
Actual or Estimated Date of Incorpora	tion or Organization:		— ⊠ Actua	al 🗆 Estimated	
Jurisdiction of Incorporation or Organ	ization: (Enter two-letter U.S. Postal	Service abbreviation for	State:		
	CN for Canada; FN for othe	r foreign jurisdiction)		D E	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seg. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ■ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Citigroup Private Equity LP ("GP") Business or Residence Address (Number and Street, City, State, Zip Code) 731 Lexington Avenue, New York, New York 10022 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Barber, John Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, New York 10013 Check Box(es) that Apply: □ Promoter ■ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Arnold, George . Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, New York 10013 Check Box(es) that Apply: Promoter ■ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Benson, Todd Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, New York 10013 Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Cabasso, Sheri Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, New York 10013 Check Box(es) that Apply: Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Coeny, Matthew Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, New York 10013 Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Cole, Call Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, New York 10013 Check Box(es) that Apply: Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Farnsworth, Craig Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, New York 10013

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or
			····	···	Managing Partner
Full Name (Last name first, if in Friedman, Darren	dividual)				
Business or Residence Address	•	Street, City, State, Zip Code)			
c/o Citigroup Private Equity	LP, 388 Green	wich Street, New York, N	ew York 10013		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in Friedman, David	dividual)	· · · · · · · · · · · · · · · · · · ·		·	
Business or Residence Address	(Number and	Street, City, State, Zip Code)		···· <u>·</u>	
c/o Citigroup Private Equity	LP, 388 Green	wich Street, New York, N	ew York 10013		
Check Box(es) that Apply:] Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, if in Jacobson, Blair	dividual)				
Business or Residence Address	(Number and	Street, City, State, Zip Code)			
c/o Citigroup Private Equity	LP, 33 Caveno	lish Square, 8th Floor, Lo	ndon, WIG OPW, U.K.		
Check Box(es) that Apply:	Promoter	Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, if ind Jain, Rakesh	dividual)				
Business or Residence Address	(Number and	Street, City, State, Zip Code)			
c/o Citigroup Private Equity	LP, 388 Green	wich Street, New York, N	ew York 10013		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Weekes, Jr., Townsend					
Business or Residence Address	•	Street, City, State, Zip Code)			
c/o Citigroup Private Equity	LP, 388 Green	wich Street, New York, N	ew York 10013		·
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Womsley, Robert		<u> </u>	- 		
Business or Residence Address	•	Street, City, State, Zip Code)			
c/o Citigroup Private Equity	LP, 33 Cavend	lish Square, 8th Floor, Loi	ndon, W1G OPW, U.K.		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Deluise, James		· · · · · · · · · · · · · · · · · · ·			
Business or Residence Address	•	Street, City, State, Zip Code)			
c/o Citigroup Private Equity	LP, 388 Green	wich Street, New York, No	ew York 10013		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Hemmer, Kenneth					
Business or Residence Address	(Number and	Street, City, State, Zip Code)			
c/o Citigroup Private Equity	LP, 388 Green	wich Street, New York, Ne	ew York 10013		

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Ramanathan, Ranesh					
Business or Residence Addre	ess (Number an	d Street, City, State, Zip Code)		
c/o Citigroup Private Equ	ity LP, 388 Gree	nwich Street, New York, N	iew York 10013		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		····		·
Smith, David					
Business or Residence Addre	ess (Number an	Street, City, State, Zip Code)	· ·	
c/o Citigroup Private Equ	ity LP, 388 Gree	nwich Street, New York, N	iew York 10013		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Plata, Sonia					
Business or Residence Addre	ss (Number an	Street, City, State, Zip Code)		
c/o Citigroup Private Equ	ity LP, 388 Gree	nwich Street, New York, N	lew York 10013		•
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	·			
Citibank N.A.	•				
Business or Residence Addre	ess (Number and	1 Street, City, State, Zip Code))		
153 East 53rd Street, New Y	ork, NY 10022				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Citigroup Global Markets I	nc. (Smith Barne	')			
Business or Residence Addre	ss (Number and	Street, City, State, Zip Code))		
388 Greenwich Street, Ne	w York, New Yo	·k 10013			
Check Box(es) that Apply:	□ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	,			
Citicorp Investment Service					<u> </u>
Business or Residence Addre	•	Street, City, State, Zip Code)	,		
One Court Square, 24th Flo	or, Long Island C	ty, NY 11120			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner (Administrator)
Full Name (Last name first, it	individual)		f		
Citigroup Alternative Inves	tments LLC				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Code)	<u> </u>		
388 Greenwich Street, New	w York, New Yo	k 10013			
					

B. INFORMATION ABOUT OFFERING		
Has the issuer sold, or does the issuer intend to sell, to non accredited investors in this offering?	Yes	No ⊠
Answer also in Appendix, Column 2, if filing under ULOE.		
2. What is the minimum investment that will be accepted from any individual?	. \$ <u>31</u>	7,150*
	Yes	No _
3. Does the offering permit joint ownership of a single unit?		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any com remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed i agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If r persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or	s an assoc	iated person or five (5)
Full Name (Last name first, if individual) Citigroup Global Markets Inc. (Smith Barney)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
388 Greenwich Street, New York, NY 10013		·
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)		
AL AK AZ AR CA CO CT DE DC FL	GA	н п
IL IN IA KS KY LA ME MD MA MI	MN	MS MO
MT NE NV NH NJ NM NY NC ND OH	OK	OR PA
RI SC SD TN TX UT VT VA WA WV	WI	WY PR
Full Name (Last name first, if individual)		
Citicorp Investment Services		
Business or Residence Address (Number and Street, City, State, Zip Code) 153 East 53 rd Street, New York, NY 10022		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	***********	All States
AL AK AZ AR CA CO CT DE DC FL	GA	HI ID
IL IN IA KS KY LA ME MD MA MI	MN	MS MO
MT NE NV NH NJ NM NY NC ND OH	OK	OR PA
RI SC SD TN TX UT VT VA WA WV	WI	WY PR
Full Name (Last name first, if individual) Cltibank N.A.		
Business or Residence Address (Number and Street, City, State, Zip Code) 153 East 53 rd Street, New York, New York 10022		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	<u> </u>	
(Check "All States" or check individual States)	*******	
AL AK AZ AR CA CO CT DE DC FL	GA	HI ID
IL IN IA KS KY LA ME MD MA MI	MIN	MS MO
MT NE NV NH NJ NM NY NC ND OH	ОК	OR PA
RI SC SD TN TX UT VT VA WA WY	WI	WY PR

^{*}Amounts in U.S. dollars have been converted from Euros at an exchange rate of 1.2686 as of September 29, 2006.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS.

1. Enter the aggregate offering price of securities included in this offering and the total amount

and already exchanged. Type of Security	Aggregate Offering Pri	Amount Already
Debt		
Equity	· · · · · · · · · · · · · · · · · · ·	
□ Common □ Preferred	\$ <u></u>	_ \$ <u>0</u>
Convertible Securities (including warrants)	S 0	\$_0
Partnership Interests		
Other (Specify)		
Total		0° \$66,474,640°
Answer also in Appendix, Column 3, if filing		<u> </u>
2. Enter the number of accredited and non-accredited investors who have offering and the aggregate dollar amounts of their purchases. For offer the number of persons who have purchased securities and the aggregate on the total lines. Enter "0" if answer is "none" or "zero."	purchased securities in this ings under Rule 504, indicate	Aggregate Dollar Amoun
	Investors	of Purchases
Accredited Investors	92	\$ 66,474,640*
Non-accredited Investors		
•		
Total (for filings under Rule 504 only)	<u>0</u>	<u> </u>
Answer also in Appendix, Column 4, if filing	under ULOE.	
 If this filing is for an offering under Rule 504 or 505, enter the informa sold by the issuer, to date, in offerings of the types indicated, the twelve to the first sale of securities in this offering. Classify securities by type 	e (12) months prior	
Type of offering	Type of Security	Dollar Amoun Sold
Rule 505		_ s
Regulation A		s
Rule 504		_ s
Total		s
4. a. Furnish a statement of all expenses in connection with the issuance securities in this offering. Exclude amounts relating solely to organ The information may be given as subject to future contingencies. I is not known, furnish an estimate and check the box to the left of the	nization expenses of the issuer. f the amount of an expenditure	
Transfer Agent's Fees		5 0
Printing and Engraving Costs		S \$41,856
Legal Fees		≤ \$ <u>47.088</u>
Accounting Fees		s 0
Engineering Fees		S 0
Sales Commissions (specify finders' fees separately)		□ \$ <u>0**</u>
Other Expenses (identify)(Consultants, information technology a	nd salaries)	S \$ <u>5,232</u>
Total	***************************************	■ \$ 94,176

^{*}Amounts in U.S. dollars have been converted from Euros at an exchange rate of 1.2686 as of September 29, 2006.

^{**}Placement fees in an aggregate amount of \$155,137 have been paid separately by certain investors that have purchased securities in this offering. Such fees are not expenses of the issuer.

C. OFFERING PRICE	NUMBER OF INVESTORS, EXPENSES AND USE	OF P	ROCEEDS	
I and total expenses furnished in response	e offering price given in response to Part C - Question to Part C - Question 4.a. This difference is the			\$ <u>66,380,464</u> *
used for each of the purposes shown. If the estimate and check the box to the left of the	ross proceeds to the issuer used or proposed to be amount for any purpose is not known, furnish an estimate. The total of the payments listed must equal forth in response to Part C - Question 4.b above.		•	
i i	·		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees			\$ <u>0</u>	□ \$ <u>0</u>
Purchase of real estate			\$ <u>0</u>	s 0
Purchase, rental or leasing and installation	on of machinery and equipment		\$ 0	□ \$_0
	s and facilities	ם	\$ 0	□ \$ 0 .
Acquisition of other businesses (including offering that may be used in exchange for	ng the value of securities involved in this		\$ 0	□ \$ 0
•		_	\$ 0	
		_		
4 •		_	\$ <u>0</u>	
	ts and related expenses		\$_0	
				□ S <u>0</u>
Column Totals			\$_0	⊠ \$ <u>66.380.464*</u>
Total Payments Listed (Column totals ac	lded)		⊠ \$ <u>66</u>	5,380,464*
	D. FEDERAL SIGNATURE			
following signature constitutes an undertaking	ned by the undersigned duly authorized person. If this not ng by the issuer to furnish to the U.S. Securities and Excha issuer to any non-accredited investor pursuant to paragrap	inge (Commission, up	on written request
Issuer (Print or Type)	Signature		Date	
T.F. Capital Investors II L.P.			October 10,	2006
Name of Signer (Print or Type)	Title of Signer (Print or Type)			<u>-</u>
By: Citigroup Private Equity LP, as General Partner By: Sher Labacco	Vice President		\	
- 2. G. Churysu	<u>.</u>		• .	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

^{*}Amounts in U.S. dollars have been converted from Euros at an exchange rate of 1.2686 as of September 29, 2006.

	STATE SIGNATURE,			
	presently subject to any of the disqualification		Yes	No ⊠
,	See Appendix, Column 5, for state respon	nse.	• •	
The undersigned issuer hereby undertakes 239.500) at such times as required by state	to furnish to any state administrator of any state law.	in which this notice is filed a	ı notice on Form D	(17 CFR
3. The undersigned issuer herby undertakes t	o furnish to the state administrators, upon writte	n request, information furnish	hed by the issuer to	offerees.
	issuer is familiar with the conditions that must his notice is filed and understands that the issue on satisfied.			
The issuer has read this notification and knows the coperson.	ntents to be true and has duly caused this notice	to be signed on its behalf by	the undersigned du	ily authorized
Issuer (Print or Type)	Signature	Date		
T.F. Capital Investors II L.P.	II	October 10, 20	06	
Name of Signer (Print or Type)	Title of Signer (Print or Type)			•
By: Citigroup Private Equity LP, as General Partner By: Shee: Cabasso	Vice President			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy of bear typed or printed signatures.